

RECEIVED
CENTRAL FAX CENTER

MAR 27 2006

FAX TRANSMISSION**DATE:** March 27, 2006**PTO IDENTIFIER:** Application Number 10/766,106 - Conf. # 2190**Inventor:** Danny Lewis *et al.***MESSAGE TO:** U.S. Patent and Trademark Office**FAX NUMBER:** (571) 278-8300**FROM:** LAHIVE & COCKFIELD, LLP

Hathaway Pease Russell

PHONE: (617) 227-7400**Attorney Dkt. #:** PRJ-006CN**PAGES (Including Cover Sheet):** 17**CONTENTS:**

- Fax Transmission (1 page)
- Certificate of Transmission (1 page)
- Transmittal Form (1 page)
- Fee Transmittal (1 page) (in duplicate)
- Petition for Extension of Time (1 page)
- Response to Non-Final Office Action (11 pages)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (617) 227-7400 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

LAHIVE & COCKFIELD, LLP
28 State Street, Boston, MA 02109
Telephone: (617) 227-7400 Facsimile: (617) 742-4214

RECEIVED
CENTRAL FAX CENTER

MAR 27 2006

PTO/SB/97 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

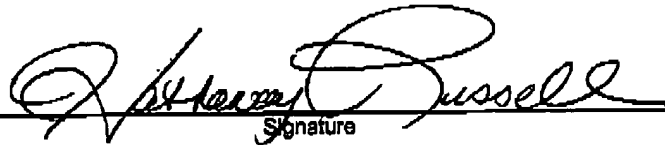
Application No. (If known): 10/786,106

Attorney Docket No.: PRJ-006CN

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on March 27, 2006
Date


SignatureHathaway Pease Russell

Typed or printed name of person signing Certificate

46,488
Registration Number, if applicable(617) 227-7400
Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

- Fax Transmission (1 page)
- Certificate of Transmission (1 page)
- Transmittal Form (1 page)
- Fee Transmittal (1 page) (in duplicate)
- Petition for Extension of Time (1 page)
- Response to Non-Final Office Action (11 pages)

MAR 27 2006

PTO/SB/21 (08-04)

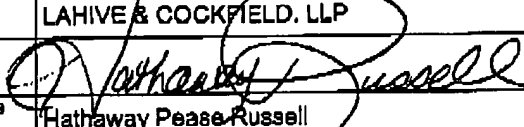
Approved for use through 07/31/2008. OMB 0951-0031

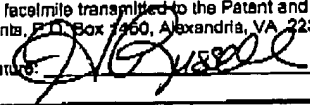
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/766,106 - Conf. #2190
	Filing Date	January 27, 2004
	First Named Inventor	Danny Lewis
	Art Unit	1615
	Examiner Name	C. A. Azpuru
Total Number of Pages in This Submission	Attorney Docket Number	PRJ-006CN

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Transmission (1 page) Certificate of Transmission (1 page)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Hathaway Pease Russell		
Date	March 27, 2006	Reg. No.	46,488

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300 at M9 Amendment, Commissioner for Patents, P.O. Box 7660, Alexandria, VA 22313-1450, on the date shown below.	
Dated: March 27, 2006	Signature:  (Hathaway Pease Russell)

RECEIVED
CENTRAL FAX CENTER

MAR 27 2006

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2009, OMB 0851-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<p>Effective on 12/04/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).</p> <p>FEE TRANSMITTAL For FY 2005</p>		<p>Complete If Known</p> <p>Application Number 10/766,108 - Conf. # 2190</p> <p>Filing Date January 27, 2004</p> <p>First Named Inventor Danny LEWIS</p> <p>Examiner Name C. A. Azpuru</p> <p>Art Unit 1815</p> <p>Attorney Docket No. PRJ-006CN</p>																																																							
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>																																																									
<p>TOTAL AMOUNT OF PAYMENT (\$) 510.00</p>																																																									
<p>METHOD OF PAYMENT (check all that apply)</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):</p> <p><input checked="" type="checkbox"/> Deposit Account Deposit Account Number <u>12-0080</u> Deposit Account Name: <u>Lahive & Cockfield, LLP</u></p> <p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <p><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</p> <p><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments</p>																																																									
<p>FEE CALCULATION</p>																																																									
<p>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</p> <table border="1"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th rowspan="2">Fees Paid (\$)</th> </tr> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td></td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td></td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td></td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td></td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table>				Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0	
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)																																																		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)																																																			
Utility	300	150	500	250	200	100																																																			
Design	200	100	100	50	130	65																																																			
Plant	200	100	300	150	160	80																																																			
Reissue	300	150	500	250	600	300																																																			
Provisional	200	100	0	0	0	0																																																			
<p>2. EXCESS CLAIM FEES</p> <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20 (including Reissues)</td> <td>50</td> <td>25</td> </tr> <tr> <td>Each independent claim over 3 (including Reissues)</td> <td>200</td> <td>100</td> </tr> <tr> <td>Multiple dependent claims</td> <td>360</td> <td>180</td> </tr> </tbody> </table> <p> <u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> <u>Multiple Dependent Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> </p> <p> <u>Indep. Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> </p>				Fee Description	Small Entity Fee (\$)	Fee (\$)	Each claim over 20 (including Reissues)	50	25	Each independent claim over 3 (including Reissues)	200	100	Multiple dependent claims	360	180																																										
Fee Description	Small Entity Fee (\$)	Fee (\$)																																																							
Each claim over 20 (including Reissues)	50	25																																																							
Each independent claim over 3 (including Reissues)	200	100																																																							
Multiple dependent claims	360	180																																																							
<p>3. APPLICATION SIZE FEE</p> <p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).</p> <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 100 =</td> <td>/50</td> <td>(round up to a whole number) x</td> <td></td> <td></td> </tr> </tbody> </table>				Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	- 100 =	/50	(round up to a whole number) x																																														
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)																																																					
- 100 =	/50	(round up to a whole number) x																																																							
<p>4. OTHER FEE(S)</p> <p>Non-English Specification, \$130 fee (no small entity discount)</p> <p>Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00</p>																																																									
<p>SUBMITTED BY</p> <p>Signature <u>[Signature]</u> Registration No. 46,488 Telephone (617) 227-7400</p> <p>Name (Print/Type) Hathaway Pease Russell Date March 27, 2006</p>																																																									

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300 at MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 27, 2006

Signature [Signature] (Hathaway Pease Russell)